Filed 03/24/20 Entered 03/24/20 15:52:56 Desc Main Case 20-01618 Doc 17 Page 1 of 5 Document

Fill	in this information t	to identify your ca	ase:						
De	btor 1	Irving C Cor	ıway, II						
	btor 2 buse, if filing)								
Uni	ited States Bankrup	otcy Court for the	NORTHERN DISTRIC	CT OF ILLINOIS					
Case number (If known) 20-01618				Chec	eck if this is:				
					An amende	0	:tion obsertes		
							ent showing postpet as of the following d		
	fficial Form				Ī	MM / DD/ YYYY			
S	chedule I:	Your Inco	ome					12/15	
	<u> </u>	e Employment	On the top of any additi	onal pages, write your name and	I case n	umber (if I	known). Answer e	ery question	
••	information.			Debtor 1		Debtor 2 or non-filing spouse			
	If you have more than one job, attach a separate page with information about additional employers.	•	Employment status	■ Employed		☐ Employed			
				☐ Not employed		☐ Not e	mployed		
	Include part-time, self-employed wo		Occupation	Business Development Manager					
	Occupation may include student		Employer's name	Power Distributing LLC					
	or homemaker, if		Employer's address	185 W Industrial Drive Elmhurst, IL 60126					
			How long employed t	here? 4 years					
Pai	rt 2: Give De	tails About Mor	thly Income						
	imate monthly incouse unless you are		ate you file this form. If	you have nothing to report for any	line, write	e \$0 in the	space. Include you	non-filing	
	ou or your non-filing e space, attach a se			ombine the information for all emplo	oyers for	that perso	on on the lines below	ı. If you need	
					For De	btor 1	For Debtor 2 or non-filing spous	Se .	
	List monthly gro	oss wages, sala	ry, and commissions (b	efore all payroll	_				

deductions). If not paid monthly, calculate what the monthly wage would be.

Estimate and list monthly overtime pay.

Calculate gross Income. Add line 2 + line 3.

		For Deptor 1		ing spouse
2.	\$	4,615.00	\$	N/A
3.	+\$	0.00	+\$	N/A
4.	\$	4,615.00	\$	N/A

Official Form 106I Schedule I: Your Income page 1

Debt	tor 1	Irving C Conway, II	-		Case	e number (if known)	20-	01618		
					Fo	r Debtor 1		r Debtor		
	Cop	y line 4 here	4.		\$	4,615.00	no \$	n-filing s	spouse N/A	_
5.	l ist	all payroll deductions:			_	•	_			_
0.			5.		æ	60E E4	æ		NI/A	
	5a. 5b.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans	5a 5b		\$_ \$	685.51 0.00	\$_ \$		N/A N/A	_
	5c.	Voluntary contributions for retirement plans	50		\$-	200.01	\$		N/A	_
	5d.	Required repayments of retirement fund loans	50		\$	0.00	\$		N/A	_
	5e.	Insurance	56		\$	260.46	\$		N/A	_
	5f.	Domestic support obligations	5f		\$	0.00	\$		N/A	_
	5g.	Union dues	50		\$	59.58	\$		N/A	_
	5h.	Other deductions. Specify:		า.+	\$	0.00	+ \$		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.		\$	1,205.56	\$		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	3,409.44	\$		N/A	_
8.	8a. 8b.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends	8a 8b		\$_ \$_	0.00 0.00	\$_ \$_		N/A N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80	3 .	\$	0.00	\$		N/A	
	8d.	Unemployment compensation	80		\$	0.00	\$		N/A	_
	8e.	Social Security	86		\$	0.00	\$		N/A	_
	8f. 8g. 8h.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	_ 8f _ 8g		\$_ \$_ \$_	0.00 0.00 0.00	\$ = \$ =		N/A N/A	<u> </u>
	OII.	Other monthly income. Specify:	_ 01	1. T	Φ_	0.00	T 3 _		N/A	
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	0.00	\$_		N/.	A
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		3,409.44 + \$		N/A	= \$	3,409.44
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ-		3,403.44 · ·			[-	3,403.44
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	dep				•	Schedule	e J. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certain lies						e. 12.	\$	3,409.44
12	Do.	you expect an increase or decrease within the year after you file this form?	2						Combi month	ned ly income
١٥.	■	No.	•							
	_	Yes Explain:								

Fill i	n this info	rmation to identify yo	ur case:									
Debt (Spo	Debtor 1 Irving C Conway, II Debtor 2 (Spouse, if filing)						Check if this is: An amended filing A supplement showing postpetition chapter 13 expenses as of the following date:					
Unite	d States Ba	ankruptcy Court for the:	NORTH	IERN DISTRICT OF ILLIN	OIS		MM	/ DD / YYYY				
Case (If kn	number own)	20-01618										
		orm 106J										
Be a info	s comple rmation. I ber (if kn	lf more space is ned lown). Answer ever	possible eded, atta y questio	If two married people ar								
Part 1.		scribe Your House joint case?	hold									
		o to line 2. Does Debtor 2 live i	n a separ	ate household?								
	_	☐ No ☐ Yes. Debtor 2 mus	t file Offici	al Form 106J-2, <i>Expense</i> s	for Separate House	ehold of De	btor 2	2.				
2.	Do you h	nave dependents?	□ No									
	Do not lis Debtor 2.	et Debtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor			Dependent's age	Does dependent live with you?			
	Do not st depende	ate the nts names.			Daughter		— - — -	10	□ No ■ Yes □ No □ Yes □ No □ Yes □ No □ Yes			
3.	expense	expenses include s of people other the and your depender	nan ┌	No Yes					☐ Yes			
exp	mate you	of a date after the b	our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp	ou are using this followed	orm as a s J, check	upple the b	ement in a Cha ox at the top o	pter 13 case to report f the form and fill in the			
the		uch assistance and		government assistance i luded it on <i>Schedule I:</i> Y				Your exp	enses			
4.		al or home owners		ses for your residence. In	nclude first mortgage	e 4.	\$_		1,165.00			
	If not inc	cluded in line 4:										
	4b. Pro	eal estate taxes operty, homeowner's ome maintenance, re				4a. 4b. 4c.	\$ _		0.00 36.00 0.00			
5.		meowner's associati		dominium dues our residence, such as ho	me equity loans	4d. 5.			0.00			

Deb	tor 1 Irving C Conway, II	Case numb	per (if known)	20-01618
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	120.00
	6b. Water, sewer, garbage collection	6b.	\$	0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	250.00
	6d. Other. Specify:	6d.	\$	0.00
7.	Food and housekeeping supplies	7.	\$	673.00
8.	Childcare and children's education costs		\$	0.00
9.	Clothing, laundry, and dry cleaning	9.	\$	50.00
	Personal care products and services	10.	\$	50.00
	Medical and dental expenses	11.	\$	25.00
12.	Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	250.00
13	Entertainment, clubs, recreation, newspapers, magazines, and books		\$	0.00
	Charitable contributions and religious donations	14.	·	0.00
	Insurance.	17.	Ψ	0.00
10.	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	125.00
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	Specify:	16.	\$	0.00
17.	Installment or lease payments: 17a. Car payments for Vehicle 1	17a.	•	0.00
	17b. Car payments for Vehicle 2	17a. 17b.		0.00
	17c. Other. Specify: Payment for use of sister's vehicle		\$	465.00
	17d. Other. Specify:	17d.		0.00
18	Your payments of alimony, maintenance, and support that you did not report as		Ψ	
	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.		\$	0.00
	Specify:	19.		
20.	Other real property expenses not included in lines 4 or 5 of this form or on Sche			
	20a. Mortgages on other property	20a.	·	0.00
	20b. Real estate taxes	20b.		0.00
	20c. Property, homeowner's, or renter's insurance	20c.		0.00
	20d. Maintenance, repair, and upkeep expenses	20d.		0.00
0.4	20e. Homeowner's association or condominium dues	20e.	·	0.00
21.	Other: Specify:	21.	+\$	0.00
22.	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	3,209.00
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	3,209.00
23.	Calculate your monthly net income.	L		
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	3,409.44
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	3,209.00
		Г		
	23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c.	\$	200.44
	The result is your <i>monthly het income</i> .	200.	т	

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ Yes.

Explain here: Transportation and vehicle insurance costs are for vehicle Debtor uses that is titled in his sister's name.

Fill in this information to identify your case:					
Debtor 1	Irving C Conway,	II			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS		
Case number	20-01618				
(if known)					

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an att	orney to help you fill out bankruptcy forms?
■ No	
☐ Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
Under penalty of perjury, I declare that I have read the su that they are true and correct.	mmary and schedules filed with this declaration and
X /s/ Irving C Conway, II Irving C Conway, II Signature of Debtor 1	Signature of Debtor 2
Date	Date